SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County**

Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Address to send permit

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

SEP 27 2021

Bayfield Co.
Planning and Zoning Ag

Permit #:	21-0348
Date: 2/14	10-19-21
Amount Paid:	175-9-28-21
Refund:	auch

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made p		3				PPLICANT. Origin			MUS	ST be subn	nitted	FIL	LOUT IN INK (NO PE	NCIL)
TYPE OF PERMIT	T REQUES	TED-	go.	LAND USE	SAN	ITARY PRIVY		CONDIT	ION	AL USE (A SPECIA	L USE	☐ B.O.A.	□ ОТН	IER
Owner's Name:	. ,	-1		. 9		iling Address:	n i	11.		City/State/Z	Zip; A		+ 17/00	Telepl	hone:
Address of Proper		1 1	rew	12	0	8315US	5	HUHO		AS	~ (0 ~ 2	> (1)	J.5480	/	15-209
282150		C Am	ARLLA	34306		Ashlond	-,	IW		5480	06			Cell Pl	hone:4984
Contractor:				8	Cor	tractor Phone:	•	Plumbe	r:					Plumb	per Phone:
Authorized Agent:	: (Person Sig	ning Appli	cation on beha	If of Owner(s))	Age	ent Phone:		Agent N	Vlailir	ng Address	(include Cit	y/State/	Zip):	Attack	orization hed
PROJECT LOCATION	Legal	Descrip	tion: (Use T	ax Statement)		Tax ID# 1553	7						ded Document:		g Ownership)
1/4, _		1/4	Gov't Lot	Lot(s)	CSM	Vol & Page C	SM E	Poc#		ot(s) #	Block #	Subdi	vision:		
Section 10) , Tow	nship <u>L</u>	17 N, F	tange <u>OS</u>	W	Town of:	=1	ezr				Lot Siz	e	Acr	7,5
	Cree		T	n 300 feet of Ri of Floodplain?		ream (incl. Intermittent))			cture is fro	m Shoreli	ne : feet	Is your Prope in Floodplai		Are Wetlands Present?
☐ Shoreland —	□ Is I	Property	/Land withi	n 1000 feet of L		ond or Flowage yescontinue —	•	Distance S	Struc	cture is fro	m Shoreli	ne : feet	Zone? □ Yes ••••No		□ Yes SNo
Non-Shoreland	d														
Value at Time of Completion				Project		Project		Total #				hat Ty	pe of y System(s)		Type of Water
* include donated time & material	d.	Projec	t William	# of Storie	S	Foundation		on proper			Is on	the pro	property?		on property
& material	□ New	Constru	uction	☐ 1-Story		☐ Basement	do	□ 1	•	☐ Mun	icipal/Cit		ana and an and an and an and an and an and an an and an an and an		☐ City
•	□ Addi	tion/Alt	eration	☐ 1-Story +		Foundation		% 2		□ (Nev	v) Sanitai	ry Spe	cify Type:		Well
\$	☐ Conv	ersion		□ 2-Story		☐ Slab		□ 3			tary (Exis ハレピハ				
*			sting bldg)		_			<u> </u>	_				ulted (min 200	gallon)
	☐ Run a Prope		ess on		E	Use Year Round		□ Non	ie	+	able (w/se post Toil		ontract)		-
		City								□ None		C.			
Existing Structu	ıre: (if add	lition, alte	eration or bu	siness is heing ar	nlied f	or) Length:				Width:			Height:		
Proposed Cons					piica	Length:		and the same of th	4	Width:			Height:	يرالا	
Proposed U	Jse	1				Proposed Struct	ure					0	imensions		Square Footage
	PRESIDENT TO SELECTION PRO	P	Principal	Structure (fir	st stru	cture on property	/)			and the made of the		(Х)		
			Residenc	e (i.e. cabin, h	unting	g shack, etc.)						(х)		
☐ Residentia	l Use			with Loft with a Pore	h							(X)		
				with (2 nd) F								(X)		
				with a Dec								(х)		
☐ Commercia	عالا اد			with (2 nd) [Deck							(X)		
Commercia	ai OSC			with Attac	ned G	arage						(X)		
						☐ sleeping quarter						(X)		
						late)						(х)		
☐ Municipal	Use											(X)		
				50 = 1 = 1 . S = 10		/ 10 11 11 11 11 11 11 11 11 11 11 11 11						(X)		
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			Other: (e)		n)							1	X)		•
		ш			or STA	RTING CONSTRUCTION	I W/IT	HOUT A PE	RMIT	WILL RESULT	TIN PENALT	TES	^ 1		-
(are) responsible for th	ne detail and a nty relying on	accuracy of this inform	y accompanyin all information ation I (we) am	g information) has be I (we) am (are) provid (are) providing in or	en exam ling and	ined by me (us) and to the that it will be relied upon b application. I (we) consen	best y Bay	of my (our) kr field County i	nowled in dete	dge and belief ermining whet	it is true, corre her to issue a	ect and co permit. I	we) further accept li	ability wh	ich may be a
	tiple Owne	ers listed	on the Deed	All Owners must	sign <u>or</u>	letter(s) of authoriza	tion	must accor	mpan	ny this appli	cation)	Dat			
Authorized Agen		u are sign	ning on beha	If of the owner(s	a lette	er of authorization mu	ust a	ccompany	this a	application)	,,	Dat	e		

In the box below: Draw or Sketch your Property (regardless of what you are applying for) Fill Out in Ink - NO PENCIL **Show Location of: Proposed Construction** (2) Show / Indicate: North (N) on Plot Plan (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4) All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show: (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond Show any (*): (6)(*) Wetlands; or (*) Slopes over 20% Show any (*): (7)See ATTACHED

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements						Description	Setb Measure	
		1							
Setback from the Centerline of Platted Road	129	Feet		Setback from the Lake (ordinary high-water mark)	_	Feet			
Setback from the Established Right-of-Way	48	Feet		Setback from the River, Stream, Creek	_	Feet			
				Setback from the Bank or Bluff		Feet			
Setback from the North Lot Line	48	Feet		Ψ					
Setback from the South Lot Line	350	Feet		Setback from Wetland	_	Feet			
Setback from the West Lot Line	600	Feet		20% Slope Area on the property	☐ Yes	□ No			
Setback from the East Lot Line	80	Feet		Elevation of Floodplain	4	Feet			
Setback to Septic Tank or Holding Tank	20	Feet		Setback to Well		Feet			
Setback to Drain Field	-	Feet							
Setback to Privy (Portable, Composting)		Feet							

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

The local Town, Village, City, State or Federal agencies may also require permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only)	Sanitary Number:	700-PS70	# of bedrooms:	Sanitary Date:
Permit Denied (Date):	Reason for Denial:			
Permit #: 0/-0348	Permit Date: 10-19	(d)		Section 1
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Recor Yes (Fused/Contigu	ious Lot(s))	Mitigation Required Mitigation Attached	☐ Yes ☐ No ☐ Yes ☐ No	Affidavit Required Affidavit Attached Yes No
Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:		Previously Granted b		e #:
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No	Existly	Were Property Line	es Represented by Owner Was Property Surveyed	
Inspection Record:		. 1		Zoning District $(A-)$ Lakes Classification (D/A)
Date of Inspection: 10/12/21	Inspected by:	4/		Date of Re-Inspection:
Condition(s): Town, Committee or Board Conditions Atta — Must Contact — Contact Town	ched? Ves No-(If Buy fills Co	no they need to be attached the Health deen tay	Peyt for la	ensing
Signature of Inspector:				Date of Approval: 10/13/20
Hold For Sanitary: Hold For TBA:	Hold For Affi	idavit: 🗌	Hold For Fees:	0 2

TOWN BOARD RECOMMENDATION -- (CLASS A - SPECIAL USE)

Residence in Ag-1 or F-1; Shoreland Grading; Short-Term Rental (1 unit); Signage; RV Ext

When Town Board has completed this form, please mail to:

Bayfield County Planning and Zoning Department P.O. Box 58 - Washburn, WI 54891

Phone - (715) 373-6138 Fax - (715) 373-0114 e-mail: zoning@bayfieldcounty.org

www.bayfieldcounty.org/147

Website:

Date Zoning Received: (Stamp Here)

RECEIVED

Property Owner(s) are responsible to give this form to the Town Clerk. Attach a copy of the County Application (8 ½ x 14) [front/back]. This is a Class A special use request. Note: The Town's Planning Commission meets prior to the Town. Once the Town meets they will forward their recommendation to the Planning and Zoning Department. Ask Town if you should be present at their meeting(s).

Property Owner Harry L Thewis Contra	actor
Property Address 28215 US Hwy 2 Author	rized Agent
1 1 1 2 2 2 2 2	s Telephone
2.20.000	n Authorization Attached: Yes () No ()
Accurate Legal Description involved in this request (specify only the	property involved with this application)
1/4 of 1/4, Section <u>I O</u> , Township <u>U 7</u> N., Ran	ge <u>OS</u> W. Town of <u>Filedan</u>
Govt. LotLot Block Subdivision	CSM#
Volume Page of Deeds Tax I.D# 15539	
Additional Legal Description:	
Applicant: (State what you are asking for) Zoning District:	M-/ Lakes Classification D/N-
We, the Town Board, <i>TOWN OF FICER</i>	, do hereby recommend to
We, the Town Board, <i>TOWN OF FICE FAU</i> ☐ Table ☐ Approval	, do hereby recommend to
☐ Table ☑ Approval Have you reviewed this for Compatibility with the Comprehensi	☐ Disapproval ve and/or Land Use Plan: ☐ Yes ☐ No
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☐ Table ☑ Approval Have you reviewed this for Compatibility with the Comprehensi	☐ Disapproval ve and/or Land Use Plan: ☐ Yes ☐ No
☐ Table ☑ Approval Have you reviewed this for Compatibility with the Comprehensi	☐ Disapproval ve and/or Land Use Plan: ☐ Yes ☐ No
☐ Table Have you reviewed this for Compatibility with the Comprehensi Township: (In detail clearly state Town Board's reason for recomme	☐ Disapproval ve and/or Land Use Plan: ☐ Yes ☐ No
☐ Table ☐ Approval Have you reviewed this for Compatibility with the Comprehensi Township: (In detail clearly state Town Board's reason for recommendation) ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM:	Disapproval ve and/or Land Use Plan: Yes No ndation of tabling, approval or disapproval) Signed: Chairman:
☐ Table Have you reviewed this for Compatibility with the Comprehensi Township: (In detail clearly state Town Board's reason for recomme ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval	Disapproval ve and/or Land Use Plan: Yes No ndation of tabling, approval or disapproval) Signed: Chairman: Supervisor: Alland Baskawick
☐ Table Have you reviewed this for Compatibility with the Comprehensi Township: (In detail clearly state Town Board's reason for recomme ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked	Disapproval ve and/or Land Use Plan: Yes No ndation of tabling, approval or disapproval) Signed: Chairman: Supervisor: Clland Anadosevick Supervisor: Tony Manue
Table Have you reviewed this for Compatibility with the Comprehensi Township: (In detail clearly state Town Board's reason for recomme ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval 3. The form returned to Zoning Department not a copy or fax ** NOTE:	Disapproval ve and/or Land Use Plan: Yes No ndation of tabling, approval or disapproval) Signed: Chairman: Supervisor: Colland Raslanick Supervisor: Tony Manuel Supervisor:
Have you reviewed this for Compatibility with the Comprehensi Township: (In detail clearly state Town Board's reason for recomme ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval 3. The form returned to Zoning Department not a copy or fax ** NOTE: Receiving Town Board approval, does not allow the start of construction or business, you must first obtain your	Disapproval Ve and/or Land Use Plan: Yes No Indation of tabling, approval or disapproval) Signed: Chairman: Supervisor: Clerk: Clerk: Chairman: Clerk: Chairman: Clerk: Chairman: Cha
Have you reviewed this for Compatibility with the Comprehensi Township: (In detail clearly state Town Board's reason for recomme ** THE FOLLOWING MUST BE INCLUDED WITH THIS FORM: 1. The Tabled, Approval or Disapproval box checked 2. The Town's reasoning for the tabling, approval or disapproval 3. The form returned to Zoning Department not a copy or fax ** NOTE: Receiving Town Board approval, does not allow the start	Disapproval ve and/or Land Use Plan: Yes No ndation of tabling, approval or disapproval) Signed: Chairman: Supervisor: Colland Raslanick Supervisor: Tony Manuel Supervisor:

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Short Term Rental



Real Estate Bayfield County Property Listing

Today's Date: 9/27/2021

Property Status: Current

Created On: 3/15/2006 1:15:23 PM

Description	Updated: 11/7/2017

Tax ID: 15539 PIN:

04-020-2-47-05-10-2 03-000-60000

Legacy PIN:

020102010000 Map ID:

Municipality:

(020) TOWN OF EILEEN S10 T47N R05W

STR: Description:

E 1/2 SW NW S OF RR ROW LESS HWY 2

IN DOC 2017R- 570748 155

Recorded Acres: Calculated Acres:

4.871 Lottery Claims: 1 Yes

First Dollar: Zoning:

(AG-1) Agricultural-1 113

7.500

ESN:

Tax Districts	Updated: 3/15/2006
1	STATE
04	COUNTY
020	TOWN OF EILEEN
020170	ASHLAND SCHOOL
001700	TECHNICAL COLLEGE

30		
3	Recorded	Documents
-	Annual Colombia Colombia Colombia	AAAA MAA AA A

WARRANTY DEED Date Recorded: 11/6/2017 2017R-570748

□ PERSONAL REPRESENTATIVES DEED

Date Recorded: 9/5/2017

Ownership

Updated: 11/7/2017

HARRY L THEWIS

ASHLAND WI

Billing Address: HARRY L THEWIS 28315 US HWY 2 ASHLAND WI 54806 Mailing Address: **HARRY L THEWIS** 28315 US HWY 2 ASHLAND WI 54806

Site Address

* indicates Private Road

28215 US HWY 2 ASHLAND 54806

Property Assessment		Updated:	2/22/2021
2021 Assessment Detail			
Code	Acres	Land	Imp.
G1-RESIDENTIAL	7.500	14,100	65,300
2-Year Comparison	2020	2021	Change
Land:	14,100	14,100	0.0%
Improved:	62,900	65,300	3.8%
Total:	77,000	79,400	3.1%

Property History

Updated: 9/7/2017

2017R-569859

Anderson 5712-12083 1636

Ne Hart 2497-12074 - Hotel

Anderson 5712-1883 41394 1636 Holding tank

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X
SANITARY SIGN SPECIAL (A) - (Twn of Eileen-9/27/2021
CONDITIONAL BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Harry Thewis 21-0348 Issued To: No. E ½ of the Town of **Eileen** Location: SW 1/4 of NW 1/4 Section 10 Range 5 Township W. S of RR ROW Less Hwy 2 in Doc 2017R-570748 CSM# Subdivision Gov't Lot Block Lot

For: Other: Short-Term Rental of Existing Structure (29' x 35') = 1,015 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must Contact Bayfield County Health Dept for Licensing. Contact Town regarding Room Tax.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler, AZA

Authorized Issuing Official

October 21, 2021

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Authorized Agent:

Address to send permit

APPLICATION FOR PERMIT BAYFIELD COUNTY, WISCONSIN

Date Stamp (Received)

SEP 17 2021

Bayfield Co.

Permit #:	21-0331
Date:	10-10-2/1
Amount Paid:	\$90.00 Cash
Other:	
Refund:	

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department.

Applicant Original Application and Control

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64185	Gille	es Ro	k	City	tshland w	I 5480	16			ell Phone:	
Email: (print clear									(c	414)	-5168
Contractor:				Contrac	tor Phone:	Plumber:			D	lumber Ph	
26	4 9			So	ame					iuiiibei Pi	ione:
Authorized Agent: Owner(s))	(Person Signin	g Applicatio	on on behalf	of Agent P		Agent Mailing Ad	ddress (include City,	/State/Zip)	: ,	Written Aut	horization
					ID#					Required (1	or Agent)
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Section	_ , Township	7 +	N, Rang	ge <u> </u>	Town of: $\sum_{i=1}^{\infty}$	ren		Lot Size		Acreage	10
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	Creek or	Landward	d side of F		escontinue —		icture is from Sho	feet	in Floodplai	Δ	re Wetlands
☐ Shoreland —	ls Prop	erty/Land	d within 10	000 feet of Lake, Por	nd or Flowage	Distance Stru	cture is from Sho	eline :	Zone?		Present? Ves
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X Non-											
Shoreland											
Value at Time						Total # of		What T	uno of		T 6
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donated time		riojeti		# of Stories	Foundation	on on	ls (on the pr	operty or		on
& material	~					property	Will	be on th	e property?		property
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- ,*	☐ Additi	on/Alter	ration		☐ Foundation	₩ 2	☐ (New) San	tary Sp	ecify Type:		¥ Well
\$30,000				LOIL		U.	- I	• • • • -			
30,000	☐ Conve	rsion		☐ 2-Story	☆ Slab	□ 3	Sanitary (E	xists) Sp	ecity Type:	r	
47	☐ Reloca	ite (existir	ng bldg)				☐ Privy (Pit)	or 🗆 V	aulted (min 200		2
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Proposed Cons	ure: (if addit truction:	(overall o	dimension	s)	for) Length:	ure	Width:	•	Height:	16.	Square ootage
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(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Date

(See Note below)

In the box below: Draw or Sketch your Property (regardless of what you are applying for)

(1) Show Location of: **Proposed Construction** Fill Out in Ink - NO PENCIL (2) Show / Indicate: North (N) on Plot Plan (3)Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) (4)Show: All Existing Structures on your Property (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) (5) Show: Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond (6)Show any (*): (*) Wetlands; or (*) Slopes over 20% (7)See May

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Setback Measurements			Description	Setb Measure	
Setback from the Centerline of Platted Road		Feet		Setback from the Lake (ordinary high-water mark)		Feet
Setback from the Established Right-of-Way	200	Feet	Nik!	Setback from the River, Stream, Creek		Feet
				Setback from the Bank or Bluff		Feet
Setback from the North Lot Line	455	Feet				
Setback from the South Lot Line	180	Feet	41	Setback from Wetland		Feet
Setback from the West Lot Line	362	Feet	ķ.	20% Slope Area on the property	☐ Yes	□ No
Setback from the East Lot Line	200	Feet		Elevation of Floodplain		Feet
*,			Carlo			-
Setback to Septic Tank or Holding Tank	100	Feet		Setback to Well		Feet
Setback to Drain Field		Feet				
Setback to Privy (Portable, Composting)		Feet				
Prior to the placement or construction of a structure within ten (10) fo	et of the minimum requir	ed sethack t	he he	oundary line from which the setback must be measured must be visible from on	e previously survey	ed corner to the

usly surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE(s):

All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For the Construction of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

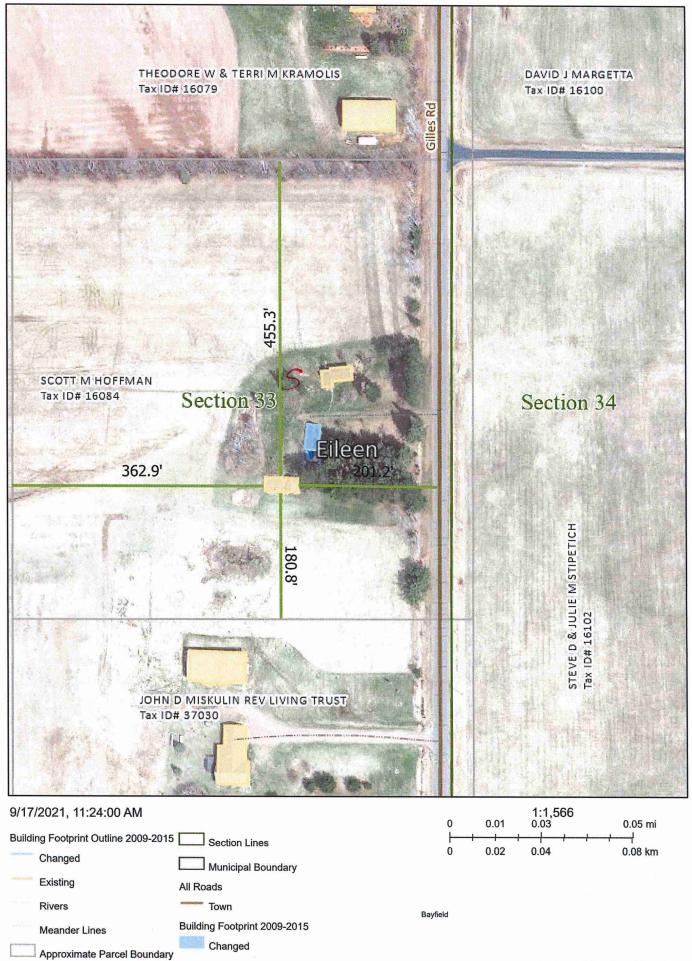
If subject property is part of a Condominium Plat, applicant hereby certifies and represents that applicant has all necessary approvals and recorded documents required to complete the project for which this permit is sought including requirements set forth in Wisconsin statutes pertaining to condominium associations, the Declaration of the Condominium Association in which the property is located, and all other rules, regulations and requirements pertaining to that Condominium Association.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

Issuance Information (County Use Only) Sanitary Number			# of bedrooms:	Sanitary Date:		
Permit Denied (Date):	Reason for Denial:					
Permit #: 21-0331	Permit Date: 10-	10-21				
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming Yes (Deed of Record Yes Yes	ous Lot(s))	Mitigation Required Mitigation Attached		Affidavit Required ☐ Yes ☐ No ☐ Yes ☐ No		
Granted by Variance (B.O.A.) ☐ Yes No Case #: Previously Granted by Variance (B.O.A.) ☐ Yes No				ase #:		
Was Parcel Legally Created Was Proposed Building Site Delineated Wes Do	Were Property Lines Represented by Owner Was Property Surveyed			Yes □ No Yes □ No		
Inspection Record: 10/6/21 Talked to OUNER - Storage only - No Hadscotic at This Time				Zoning District () () (Lakes Classification () ()		
Date of Inspection: 10/5/21	Inspected by:	//		Date of Re-Inspection:		
Condition(s): Town, Committee or Board Conditions Attached? Yes No-(If No they need to be attached.) - Build as proposed. - NoT for Haman Habitatia as Sleeping - If pressurited water enters structure get required septic permits Signature of Inspector: Date of Approval:						
Signature of Inspector:	L			Date of Approval: 10/6/2/		
Hold For Sanitary: Hold For TBA:	Hold For Affic	lavit: 🗌	Hold For Fees: 🗌			

(@August 2021) @@January 2000

Hoffman Pole Barn Setbacks





Real Estate Bayfield County Property Listing

020107105990

Today's Date: 9/17/2021

Description

Updated: 7/16/2010

Tax ID:

16084

PIN:

04-020-2-47-05-33-4 04-000-20000

Legacy PIN:

Map ID:

Municipality:

STR:

(020) TOWN OF EILEEN S33 T47N R05W

Description:

NE 1/4 SE 1/4 SE 1/4 IN V.987 P.197

Recorded Acres: Calculated Acres: Lottery Claims:

10.000 10.121 0

First Dollar:

Yes (AG-1) Agricultural-1

Zoning: ESN:

113

Tax Districts	Updated: 3/15/2006		
1	STATE		
04	COUNTY		
020	TOWN OF EILEEN		
020170	ASHLAND SCHOOL		
001700	TECHNICAL COLLEGE		



Recorded Documents

Updated: 3/15/2006

PERSONAL REPRESENTATIVES DEED

Date Recorded: 1/9/2008

2008R-518462 987-197

Ⅲ TERMINATION OF DECEDENT'S INTEREST

Date Recorded: 1/9/2008

2008R-518461 987-194

CONVERSION

Date Recorded:

521-285

WARRANTY DEED

Date Recorded: 11/20/1990

389358 521-285

64185 Gilles Rd Ashland WI 54806

Created On: 3/15/2006 1:15:24 PM

Ownership

Updated: 7/16/2010

Property Status: Current

SCOTT M HOFFMAN

MILWAUKEE WI

Billing Address: SCOTT M HOFFMAN 3130 S CHASE AVE

MILWAUKEE WI 53207

Mailing Address: SCOTT M HOFFMAN 3130 S CHASE AVE MILWAUKEE WI 53207

Site Address * indicates Private Road

64185 GILLES RD

ASHLAND 54806

Property Assessment	Updated: 4/10/2017		
2021 Assessment Detail	WALES 12 12 12 12 12 13 14 14 14 14 14 14 14		
Code	Acres	Land	Imp.
G1-RESIDENTIAL	1.000	5,900	37,300
G5-UNDEVELOPED	9.000	4,100	0
2-Year Comparison	2020	2021	Change
Land:	10,000	10,000	0.0%
Improved:	37,300	37,300	0.0%
Total:	47,300	47,300	0.0%



Property History

N/A

Town, City, Village, State or Federal Permits May Also Be Required

LAND USE - X SANITARY -SIGN -SPECIAL -CONDITIONAL -BOA -

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Issued To: Scott Hoffman 21-0331 No. NF 1/4 of the Location: SE 1/4 of **SE** Section 33 Town of **Eileen Township** Range W. Gov't Lot Block Subdivision CSM# Lot

For: Residential: [1.5-Story]; Garage/Storage (36' x 48') = 1,728 sq. ft. Height of 16'

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Build as Proposed. Not for Human Habitation or Sleeping Purposes. If pressurized water enters structure get required septic permits.

You are responsible for complying with state and federal laws concerning construction near or on wetlands, lakes, and streams. Wetlands that are not associated with open water can be difficult to identify. Failure to comply may result in removal or modification of construction that violates the law or other penalties or costs. For more information, visit the department of natural resources wetlands identification web page or contact a department of natural resources service center (715) 685-2900.

NOTE: This permit expires one year from date of issuance if the authorized construction work or work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not completed

or if any prohibitory conditions are violated.

Tracy Pooler, AZA

Authorized Issuing Official

October 10, 2021

Date